

**BEFORE THE BOARD OF EXAMINERS OF
RESIDENTIAL CARE FACILITY ADMINISTRATORS**

STATE OF IDAHO

In the Matter of the License of:)	
)	Case No. RCA-2009-4
VIVIAN F. RYAN,)	
License No. RCA-221,)	FINDINGS OF FACT,
)	CONCLUSIONS OF LAW AND
Respondent.)	FINAL ORDER
)	

Having reviewed the documents and correspondence contained in the administrative file in this matter, the Idaho State Board of Examiners of Residential Care Facility Administrators (the "Board") hereby enters the following Findings of Fact, Conclusions of Law, and Final Order:

FINDINGS OF FACT

1. Respondent Vivian F. Ryan ("Respondent") is a duly licensed residential care facility administrator in the State of Idaho holding License No. RCA-221.

2. On March 19, 2009, the Board entered into a Notice of Violation and Settlement Order re: Continuing Education (the "Order") with Respondent in this case for Respondent's failure to obtain 12 hours of Board-approved instruction during the one-year period before renewal on June 11, 2007. In the Order, Respondent was required to pay a \$250 fine and \$100 in costs to the Board within 30 days of entry of the Board's Order and to make up the 12-hour continuing education deficiency within 90 days of entry of the Board's Order. A copy of the Order is attached as Exhibit A.

3. On April 16, 2009, the Bureau of Occupational Licenses received a letter from Respondent wherein Respondent stated that she was unable to pay the fine as required by the Order. A copy of Respondent's letter is attached as Exhibit B.

4. On June 2, 2009, Respondent voluntarily surrendered her license, admitting

to violations of the Idaho Residential Care Administrators Act, title 54, chapter 42, Idaho Code. A copy of the voluntary surrender form signed by Respondent is attached hereto as Exhibit C.

5. Respondent knowingly and freely waived her right to a hearing, and waived all rights granted to Respondent pursuant to the Administrative Procedures Act, chapter 52, title 67, Idaho Code.

CONCLUSIONS OF LAW

1. As a licensed residential care facility administrator in the State of Idaho, Respondent is subject to the jurisdiction of the Board and to the provisions of title 54, chapter 42, Idaho Code, and the rules and regulations promulgated by the Board thereunder.

2. Respondent's failure to comply with the Board's March 19, 2009, Order constitutes grounds for revocation or suspension of Respondent's license to practice as a residential care facility administrator pursuant to Idaho Code § 54-4213(1)(b).

3. Respondent's voluntary surrender of licensure authorizes the Board to revoke or suspend Respondent's license without further process.

ORDER

NOW, THEREFORE, IT IS HEREBY ORDERED, based upon the foregoing Findings of Fact and Conclusions of Law, and good cause being shown, that License No. RCA-221 issued to Respondent Vivan F. Ryan, including any renewal rights, is hereby REVOKED. It is further ordered that, should Respondent apply for licensure in the future, Respondent shall present evidence to the Board verifying Respondent's payment of the fine and costs and her completion of the 12-hour continuing education deficiency, as ordered in the March 19, 2009, Order, in addition to satisfying all other conditions generally required for licensure applications.

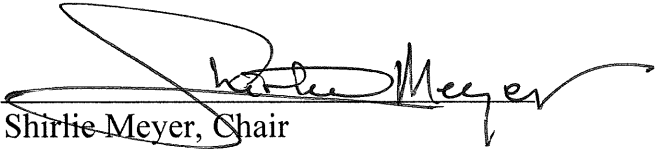
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This order is effective immediately.

DATED this 16 day of June, 2009.

IDAHO STATE BOARD OF EXAMINERS
OF RESIDENTIAL CARE FACILITY
ADMINISTRATORS

By 
Shirlee Meyer, Chair

NOTICE OF DUE PROCESS RIGHTS

NOTE: THIS NOTICE IS PROVIDED SOLEY FOR COMPLIANCE WITH IDAHO CODE § 67-5248, AND IS NOT INTENDED TO REINSTATE ANY RIGHTS PREVIOUSLY WAIVED BY RESPONDENT.

This is a final order of the Board. Any party may file a motion for reconsideration of this final order within fourteen (14) days of the service date of this order. The Board will dispose of the petition for reconsideration within twenty-one (21) days of its receipt, or the petition will be considered denied by operation of law. See Idaho Code § 67-5246(4).

Pursuant to Idaho Code §§ 67-5270 and 67-5272, any party aggrieved by this final order or orders previously issued in this case may appeal this final order and all previously issued orders in this case to district court by filing a petition in the district court of the county in which:

- a. A hearing was held,
- b. The final Board action was taken,
- c. The party seeking review of the order, resides, or
- d. The real property or personal property that was the subject of the Board action is located.

An appeal must be filed within twenty-eight (28) days (a) of the service date of this final order, (b) of an order denying petition for reconsideration, or (c) the failure within twenty-one (21) days to grant or deny a petition for reconsideration, whichever is later. See Idaho Code § 67-5273. The filing of an appeal to district court does not itself stay the effectiveness or enforcement of the order under appeal.

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that on this 16th day of June, 2009, I caused to be served a true and correct copy of the foregoing by the following method to:

Vivian F. Ryan
10601 W. Oakridge Drive
Sun City, AZ 85315

- ☒ U.S. Mail
- ☐ Hand Delivery
- ☒ Certified Mail, Return Receipt Requested
- ☐ Overnight Mail
- ☐ Facsimile: _____
- ☐ Statehouse Mail

Emily A. Mac Master
Deputy Attorney General
P.O. Box 83720
Boise, ID 83720-0010

- ☐ U.S. Mail
- ☐ Hand Delivery
- ☐ Certified Mail, Return Receipt Requested
- ☐ Overnight Mail
- ☐ Facsimile: _____
- ☒ Statehouse Mail



Tana Cory, Chief
Bureau of Occupational Licenses

ORIGINAL

BEFORE THE IDAHO BOARD OF EXAMINERS OF RESIDENTIAL CARE FACILITY
ADMINISTRATORS

STATE OF IDAHO

RECEIVED

APR 16 2009

In the Matter of the License of:

VIVIAN F RYAN
10601 W. OAKRIDGE DRIVE
SUN CITY AZ 85351

License No. RCA-221,
Respondent.

)
) Case No. RCA-2009-4-
)
) OCCUPATIONAL LICENSES
) NOTICE OF VIOLATION AND
) SETTLEMENT ORDER RE:
) CONTINUING EDUCATION

NOTICE OF VIOLATION:

You are hereby notified that, based upon the audit by the Bureau of Occupational Licenses of your continuing education records for the year before renewal of your license on June 11, 2007, you have not met the following continuing education requirements adopted by the Idaho Board of Residential Care Facility Administrators under the authority of Idaho Code § 54-4205 as follows:

- X 12 hours of Board-approved instruction during the one-year period before renewal of your license, as required by Rule 401, IDAPA 24.19.01.401. Your audit shows 0 hours of qualifying instruction were submitted as having been taken during this one-year period, leaving you a deficiency of 12 hours for this period.

If you accept the allegations of this Notice of Violation and wish to settle this matter under the terms below, please sign and return this document on or before **January 23, 2009**, to:

Idaho Bureau of Occupational Licenses
Owyhee Plaza
1109 Main Street, Suite 220
Boise, ID 83702-5642

TERMS OF SETTLEMENT:

1. This Settlement is a disciplinary action. I have read, understand and admit the violation(s) set forth above. I further understand that this Settlement constitutes cause for disciplinary action upon my license to practice residential care facility administration in the State of Idaho.

2. I understand that I have the right to a full and complete hearing; the right to confront and cross-examine witnesses; the right to present evidence or to call witnesses, or to testify myself; the right to reconsideration of the Board's orders; the right to judicial review of the Board's orders; and all rights accorded by the Administrative Procedure Act of the State of Idaho and the laws and rules governing the practice of residential care facility administration in the State of Idaho. I hereby freely and voluntarily waive these rights in order to enter into this Settlement as a resolution of the Notice of Violation.

3. I understand that in signing this Settlement I am enabling the Board to impose disciplinary action upon my license without further process.

Case No. RCA-2009-4

4. I agree to pay to the Board an administrative fine in the amount of Two Hundred Fifty and No/100 Dollars (\$250.00) within thirty (30) days of entry of the Board's Order accepting this Settlement.

5. I agree to pay to the Board its costs in bringing this matter in the amount of One Hundred and No/100 Dollars (\$100.00) within thirty (30) days of entry of the Board's Order accepting this Settlement.

6. If I have not already done so, I will make up my deficiency of 12 continuing education hours within ninety (90) days of the entry of the Board's Order accepting this Settlement.

☐ IF APPLICABLE: _____ hours of qualifying instruction that I have taken since my renewal date will be applied to my deficiency for the one-year audit period ending June 11, 2007. These hours applied to my deficiency will be not applied to any other renewal year.

7. When I renew my license in 2009 and 2010, I will submit with my License Renewal Application documentation verifying completion of the required continuing education.

8. My violation of any of these terms may warrant further Board action. The Board retains jurisdiction over this matter until it is finally resolved according to its terms.

9. The Chief of the Bureau of Occupational Licenses will present this signed Settlement to the Board. I understand that the Board may accept, modify with my approval, or reject this Settlement, and that if the Board rejects this Settlement, an administrative Complaint may be filed against me with the Board. I waive any right I may have to challenge the Board's impartiality to hear the allegations in the administrative Complaint based on the fact that the Board has considered and rejected this Settlement. I do not waive any other rights regarding challenges to Board members.

10. If the Board rejects this Settlement then, except for my waiver set forth in Paragraph 9, this Settlement will be null and void, and admissions in this Settlement will not be admissible at any subsequent disciplinary hearing.

Dated and signed this 22 day of JANUARY, 20 09.

William T. Ryan
Respondent

❖
ORDER:

It is so ordered that this settlement be approved this 19th day of March, 20 09.

IDAHO BOARD OF RESIDENTIAL CARE FACILITY ADMINISTRATORS


By Tom Springer
Board Chair

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that on this 14th day of March, 2009, I caused to be served a true and correct copy of the foregoing by the following method to:

Vivian F Ryan
10601 W. Oakridge Drive
Sun City, AZ 85351

- ☒ U.S. Mail
- ☐ Hand Delivery
- ☒ Certified Mail, Return Receipt Requested
- ☐ Overnight Mail
- ☐ Facsimile: _____
- ☐ Statehouse Mail



Tana Cory, Chief
Bureau of Occupational Licenses

RECEIVED

APR 16 2009

4-12-09
OCCUPATIONAL LICENSES

To: The State of Idaho,

I'm unable to pay this fine.

Please do as you need to do, and
suspend my Licenses.

Sincerely
Virvan G Ryan

IDAHO BUREAU OF OCCUPATIONAL LICENSES

VOLUNTARY SURRENDER OF LICENSE

I, VIVIAN F. RYAN, hereby voluntarily surrender my license to practice as a residential care facility administrator in the State of Idaho. I agree and consent that the surrender of my license to practice is done without an order, order to show cause, hearing, or any other proceeding compelling its surrender. In view of my failure to comply with Idaho Law, title 54, chapter 42, Idaho Code, and the rules promulgated by the Idaho Board of Examiners of Residential Care Facility Administrators ("Board"), and as an indication of my good faith in desiring to remedy any incorrect or unlawful practices on my part, I voluntarily surrender my license to practice in the State of Idaho and agree to immediately discontinue the practice of residential care facility administration in this state.

I understand that I have the right to a hearing, the right to confront and cross-examine witnesses, the right to present evidence and testimony on my behalf, the right to appeal and all other rights accorded to me by the Idaho Administrative Procedures Act, title 67, chapter 52, Idaho Code, and the laws and rules governing the practice of residential care facility administration, title 54, chapter 42, Idaho Code. I hereby freely and knowingly waive these rights without further process as a resolution of any claims or allegations which might otherwise be brought against me by the Board. I further waive any license renewal rights provided by Idaho Code § 67-2614.

I acknowledge that in surrendering my license to practice, I am not making any admissions; however, I specifically waive the right to contest this relinquishment in any subsequent proceeding. I acknowledge that the Board has jurisdiction to proceed against my license pursuant to Idaho Code § 54-4213(1)(b). I understand that the Board may enter an order either revoking or suspending my license to practice based upon my voluntary surrender of my license, which order may include a civil penalty and/or the imposition of costs and fees incurred by the Board in its investigation and prosecution of any claims or allegations against me, and I hereby consent to the imposition of such discipline.

I understand and acknowledge that by surrendering my license to practice, all of the privileges associated with said license are hereby surrendered until such time as I am again properly licensed. I understand that to regain a license to practice in the State of Idaho, I must re-apply to the Board pursuant to the provisions of title 54, chapter 42, Idaho Code, and all applicable rules and orders entered by the Board. I understand and agree that any decision regarding reinstatement of my license is a discretionary decision for the Board. I understand and agree that the Board may rely on factors set forth in this document or other than those set forth in this document as grounds for denial of a petition for reinstatement of my license or any license application that I may submit.

I waive refund of any payments made by me in connection with my license under the Idaho Residential Care Administrators Act and any rules promulgated thereunder.

Name of Licensee: Vivian F. Ryan License No.: RCA-221

Address: 10601 W. Oakridge Drive Sun City, AZ 85351
street city zip

Signature of Licensee or Authorized Individual: Vivian F. Ryan
Date: 6-2-09

Signature of Witness: Shandra Jones Exhibit C
Page 1 of 1 Date: 6-2-09 [Rev. 10-07]